

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

~~10/634075~~ 10/634075

## CLAIMS AS FILED - PART I

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20 =   | *            |
| INDEPENDENT CLAIMS  | minus 3 =    | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 395.00 |
| x 25      |        |
| x 100     |        |
| + 180     |        |
| TOTAL     |        |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 790.00 |
| x 50      |        |
| x 200     |        |
| + 360     |        |
| TOTAL     |        |

## CLAIMS AS AMENDED - PART II

|             | (Column 1)  |   | (Column 2)                       |       | (Column 3)                         |
|-------------|---|---|----------------------------------|-------|------------------------------------|
| AMENDMENT A | 12/20/14  |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR |
|             | Total   | * | 23                               | Minus | ** 23 =                            |
|             | Independent   | * | 2                                | Minus | *** 3 =                            |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                  |       |                                    |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE  | ADDI-TIONAL FEE |
|-------|-----------------|
| x 25  |                 |
| x 100 |                 |
| + 180 |                 |
| TOTAL |                 |

| RATE  | ADDI-TIONAL FEE |
|-------|-----------------|
| x 50  |                 |
| x 200 |                 |
| + 360 |                 |
| TOTAL |                 |

|             | (Column 1)  |   | (Column 2)                       |       | (Column 3)                         |
|-------------|---|---|----------------------------------|-------|------------------------------------|
| AMENDMENT B |   |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR |
|             | Total   | * |                                  | Minus | ** =                               |
|             | Independent   | * |                                  | Minus | *** =                              |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                  |       |                                    |

| RATE  | ADDI-TIONAL FEE |
|-------|-----------------|
| x 25  |                 |
| x 100 |                 |
| + 180 |                 |
| TOTAL |                 |

| RATE  | ADDI-TIONAL FEE |
|-------|-----------------|
| x 50  |                 |
| x 200 |                 |
| + 360 |                 |
| TOTAL |                 |

|             | (Column 1)  |   | (Column 2)                       |       | (Column 3)                         |
|-------------|---|---|----------------------------------|-------|------------------------------------|
| AMENDMENT C |   |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR |
|             | Total   | * |                                  | Minus | ** =                               |
|             | Independent   | * |                                  | Minus | *** =                              |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                  |       |                                    |

| RATE  | ADDI-TIONAL FEE |
|-------|-----------------|
| x 25  |                 |
| x 100 |                 |
| + 180 |                 |
| TOTAL |                 |

| RATE  | ADDI-TIONAL FEE |
|-------|-----------------|
| x 50  |                 |
| x 200 |                 |
| + 360 |                 |
| TOTAL |                 |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.